

Health Regulation Administration

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALR-0001	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 12/17/2010
NAME OF PROVIDER OR SUPPLIER THE ARMY DISTAFF FOUNDATION INC		STREET ADDRESS, CITY, STATE, ZIP CODE 6200 OREGON AVENUE NW WASHINGTON, DC 20015	

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
R 000	Initial Comments An annual licensure survey was conducted on December 14, 2010 through December 17, 2010 to determine compliance with Assisted Living Law " DC Code § 44-101.01 " The following deficiencies were based on record reviews and interviews. The sample sizes were five(5) resident records based on a census of forty-five(45) residents and ten(10) employee records based on a census of twenty-five (25) employees. The facility was found to be in substantial compliance at the time of this inspection.	R 000	Department of Health Health Regulation & Licensing Administration Intermediate Care Facilities Division 899 North Capitol St., N.E. Washington, D.C. 20002	
R 600	Sec. 701d13 Staffing Standards. (13) Complete the training required by section 702 and 12 additional hours of training, annually, conducted by a nationally recognized organization that possesses experience in training staff in dementia care, such as the Alzheimer's Disease and Related Disorders Association, on managing residents who are living with cognitive impairments. Based on record review and interview, it was revealed that the Assistant Living Administrator failed to take the annually required 12 hour training conducted by a nationally recognized organization that possesses experience in training staff in dementia care, such Alzheimer's Disease and Related Disorders Association, on managing residents who are living with cognitive impairment. The finding includes: On December 17, 2010 at approximately 12:30 p.m., a record review of the Assistant Living Administrator's (ALA) personnel record revealed the ALA had received annual training provided by the facility, however there was no documented	R 600	She required document 12/28/2010 for ALA will be kept in file at all times	

Health Regulation Administration

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

DATE FORM

Heidi B. Shum TITLE
AL QA

(X6) DATE

12/28/2010
If continuation sheet 1 of 2

H37Y11

Health Regulation Administration

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R 600	Continued From page 1 evidence of the annually required 12 hour training conducted by a nationally recognized organization that possesses experience in training staff in dementia care, such Alzheimer's Disease and Related Disorders Association, on managing residents who are living with cognitive impairment. During a face to face interview with the ALA on December 17, 2010, at approximately 12:45 p.m., she indicated that she had taken the required training but the documentation was not in her file at the time of the survey.	R 600			
R 981	Sec. 1004a General Building Interior (a) An ALR shall ensure that the interior of its facility including walls, ceilings, doors, windows, equipment, and fixtures are maintained structurally sound, sanitary, and in good repair. Based on observation and staff interview, the facility failed to ensure the facilities resident apartments and common areas were maintain in a satisfactory condition. The finding includes: During an environmental inspection on December 14, 2010, at approximately 10:00 a.m., nine apartments were randomly selected for inspection occupied by the resident population of thirty-nine (39). In two of the residents rooms, battery coverings were observed missing from the smoke detectors. At approximately 2:15 p.m. the above cited concerns were acknowledge by the facility engineer and the director of housekeeping.	R 981	The missing smoke detectors covers were replaced. ALA and Environmental staff members will conduct an bi monthly inspection of all apartments		12/28/2010